

# Discover Card/Novus Payment Form

**Instructions:** The State of Kansas has negotiated a contract with Discover Card for handling and processing of each transaction. This contract requires that a 2.5% handling fee be assessed to each transaction. When making a payment by Discover Card, you must complete this form and attach it with your submitted application form to the Bureau of Air and Radiation. When completing this form you must provide your Discover Card account number, expiration date, signature and date, and you must calculate the total amount of the payment, including the additional handling fee of 2.5%. Those payment forms that are missing any of this information will be returned to the individual identified on the form. **Since Discover Card is the only credit card accepted, those forms that have any other credit card number listed (such as Visa, etc.) will be returned to the individual identified on the form.**

Please note, after this transaction has been processed, this form will be properly disposed of by shredding.

Account Number: _____
Expiration Date: ____ / ____
Name as it appears on the card: _____
Company Name: _____
Mailing Address: _____
City: _____ State: _____ Zip: _____

Payment Amount	\$
2.5% Handling Fee	\$
<b>Total</b>	\$

I hereby certify that all information provided on this payment form is complete and accurate and understand that a 2.5% convenience fee has been included in the total of this transaction.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Kansas Department of Health and Environment  
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